	Substitute for Form PTO-876  Substitute for Form PTO-876												YI UF COMERC	
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		Column 11											I OT	UED ~
	BA	FOR NUMBER FILED NUMBER EXTE							SMALL ENTITY			OR	SMA	HER THAI ILL ENTITI
	(37 CFR 1.16(a))								RAT	E F	EE			
	(37	TOTAL CLAIMS (37 CFR 1.16(c))							L	5			RATE	· Ff
	INC	INDEPENDENT CLAIMS  (37 CFR 1.16(b))  (b) minus 20							x . 2=	2.		OR	-	<u>s</u>
		minus 3 = .							x \$ 100	5		OR	x s 50	
	MUI	LTIPLE DEPE	NDENT CLAIM	IMPRESENT (37 CFR 1.16(d))				$\dashv$				OR	x s 200	
									+ s 180	1		OR	+360	+
	* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL			. (		
			CLAIMS A	S AMENC	PA - PA	PARTI						OR	TOTAL	
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Ĺ	¥ V	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							x s 100=				s 20Q	
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			• •			TOTAL		┪ 。	*	s360				
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	<u>ا</u> ت		CLAIMS REMAINING		HIGHE	EST		1 [	<del></del>					
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N N	Inde	pendent FR 1.16(6))	•	Minus	414 .			× s	25			-	50 <sub>=</sub>	FEE
AMENDMEN	500	L		ON OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)		1	× s	x s 1002	OR					
	FIRE	PRESENTA	TION OF MULTIP	LE DEPENDE	ENT CLAIM		180.		OR	× s 2				
"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For IN THIS SPACE":													60 <sub>=</sub>	
	n (tre of (tre	e entry in col e "Highest Ni	umn 1 is less th	an the entry	in column 2	2, write "(	)^ in ∞lumn 3		T. FEE		OR	TOTAL ADD'L	FEE .	
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his c	olledi	on of inform	- CAROUSTY	raid for (1	olal or Inde	penden()	is the biobost							í

Interrighest Number Premously Paid For [Total or Independent] is the highest number found in the appropriate box in column 1. This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to fite (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.